Part B - FEE(S) TRANSMITTAL Complete and end this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Express Mail No. EV475142207US Commissioner for Patents JAN 0 4 7006 P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000 This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). INSTRUCTIQ Note: A certificate of mailing below can only be used for domestic mailings of the 15 should be completed where appropriate. All further correspondence including the Patent, refers and notification of maintenance fees will be mailed to the current correspondence address as Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must indicated unless corrected below or otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. have its own certificate of mailing or transmission. Certificate of Malling or Transmission CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for express mall in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. JONES DAY 222 East 41st Street New York, New York 10017 (Signature) (Date) **FILING DATE** FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. December 12, Larson et al. 8932-975-999 9700 10/734,546 2003 **GUIDED RETRACTOR AND METHODS OF USE** TITLE OF INVENTION: **PUBLICATION FEE** TOTAL FEE(S) DUE **SMALL ENTITY ISSUE FEE** DATE DUE APPLN, TYPE \$1400 (large) \$1,700.00 3/13/06 No \$300.00 nonprovisional \$700 (small) **EXAMINER ART UNIT** CLASS-SUBCLASS 3733 600-201000 Philogene, Pedro 2. For printing on the patent front page, list 1. Change of correspondence address or indication of "Fee Address" (37 CFR Jones Day 1. 1.363). (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address 2. form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev the names of up to 2 registered patent 3. 03-02 or more recent) attached. Use of a Customer Number is required. attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE: Paoli, Pennsylvania Synthes Spine Company, LP Please check the appropriate assignee category or categories (will not be printed on the patent):

Individual
Corporation or other private group entity
Government 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: ☐ A check in the amount of the fee(s) enclosed. Issue Fee ■ Payment by credit card. Form PTO-2038 is attached. ☑ Publication Fee (No small entity discount permitted) ■ Advance Order - # of Copies ☑ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3013 (enclose an extra copy of this form). 01/09/2006 TBESHAH2 00000110 503013 10734546

01 F5. Change In Entity Status (florily latus indicated above) 02 FC:1504 300.00 DA

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer daiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USP O is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and

ad) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United rk Office

(Authorized Sign

(Date)

Attorney I

Registration No. 54,390

January 4, 2006

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Conflict stiality is governed by 35 U.S.C. 122 and 37 CRF 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE